

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845

Statement of Foreign Qualification of a Foreign Limited Liability Partnership

FILING FEE: \$100

The undersigned hereby registers under SDCL 48-7A-1102 as a foreign limited liability partnership

1. The name, which ends with "**Registered Limited Liability Partnership**" or "**Limited Liability Partnership**" or the abbreviation "**R.L.L.P.**", or "**L.L.P.**", or "**RLLP**," or "**LLP**" is:

2. The partnership is a registered limited liability partnership organized under the laws of the state of _____

3. The street address of its chief executive office and if different, the street address of an office of the partnership in this state, if any _____

4. If there is no office of the partnership in South Dakota, the name and street address of the South Dakota agent for service of process is: _____

5. The deferred effective date of the registration if it is not to be effective upon filing of the registration: _____

I declare under penalty of perjury that the contents of the above statement are accurate.

Dated _____

(Partner Signature)

(Partner Signature)

The registration must be signed by at least two partners authorized to execute a registration.

Please submit one original for filing and one copy to receive date stamped acknowledgement of filing.

foreignllpstatementofqualification July 2005